


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 JUL 15 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L12461 1. Entity Name LICENSE CORP. NO. 1	
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Principal Place of Business 800 DOUGLAS ROAD ANNEX BLDG # 111 CORAL GABLES, FL 33134 US	Mailing Address 3102 OAK LAWN AVE SUITE 215 DALLAS, TX 75219 US
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DO NOT WRITE IN THIS SPACE



07082004 No Chg-P CR2E034 (10/03) *MRS*

4. FEI Number 75-2710436	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEOP TICHENOR, MCHENRY T JR 3102 OAK LAWN AVE., STE 215 DALLAS, TX 75219
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEOP <i>Treasurer</i> HINSON, JEFFREY T 3102 OAK LAWN AVE., STE 215 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY - ST - ZIP	COO STONE, GARY 3102 OAK LAWN AVENUE STE 215 DALLAS, TX 75219
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GEROW, DAVID <i>[Signature]</i> 3102 OAK LAWN AVE., STE 215 DALLAS, TX 75219
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

700039532657
07/26/04--01063--006 **550.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *David Gerow* *7/13/04* *214-525-7707*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #